/Turkic Peoples of Sinkiang/

S 759 C. Efforts of the Government in the Field of Health and Sanitation

S [177] Only a few doctors in Eastern Turkestan have a Western scientific training. Most of them are either Chinese or Europeans (White Russians). Lately, however, young Turkic people possessing a formal education have been sent to Western Turkestan and to China Proper to study in medical colleges. Awareness S 759 of the lack of proper medical personnel and equipment in Sinkiang 743 first inspired the Nationalists to try to open clinics and hospitals S in Sinkiang. The Communists have followed in their steps with a 743 somewhat more extensive program, according to their reports. • 744 Clinics were opened in various parts of the Sinkiang Autonomous 268 Region, with the aim of combating the most common diseases in 669 the area. They have facilities for innoculation against certain diseases, and place particular emphasis on curing and preventing venereal diseases.

S 874 In April, 1955, a new medical college was opened in Sinkiang to meet the problem of lack of medical personnel. The Communists announced that "Sinkiang's new medical college...is ready to enroll 250 students of various nationalities for the coming autumn term. A teaching staff of 100 including professors, lecturers and practicing physicians will arrive here in June from S 874 other parts of the country to take up their posts. The medical 743 college is part of a scheme for building a medical center in this provincial capital of Sinkiang, where the inhabitants belong mostly to national minorities. The project includes a 600-bed hospital and a clinic able to treat 800 patients daily." (NCNA, Urumchi, April 19, 1955).

III. Health and Sanitation among the Tibetans of Chinghai

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Regardless of whether he be rich or poor, farmer or nomad, the diet of the Tibetan consists primarily of four staples, grain (primarily parched and roasted barley), meat, cheese and butter. However, the questions of wealth and mode of life determines the relative proportions of each of the staples. The parched barley, or tsamba is generally added to the buttered tea and the consequent mush is eaten. The sedentary Tibetans resort most frequently to pork or small game animals, such as marmots, for their meat supply. Very few of the farmers can afford beef or mutton as a staple. Yak cheese and the curds of soured yak and sheep milk are favorite items, the latter often counting as a sort of dessert. The nomadic diet uses much less of the grain and is preponderantly meat, including yak-beef and mutton, butter and other dairy products. The Tibetans eat almost every part of the animal except its hooves and hide. The wealthy Tibetans, and the poorer ones

/The Chinese/

by half a million people - even if they live mainly on rice - is bound to be formidable. No sewage system of any kind exists; its place is taken by an old established guild of public servants who can be seen every morning in large numbers making their way through the streets. The casks or buckets which dangle from the bamboo poles across their shoulders smell no better than you would expect them to. They are always full to the brim and their contents, which are eventually sold to truck gardens on the outskirts of the city, are a constant threat to the legs of the passers-by.... The buckets in which they carry their night soil down the hill are used, after being briskly rinsed, to carry their water up."

Besides producing a very unpleasant picture, this description brings out the very serious problems connected with the lack of a proper sewage system. It also points out the many possibilities for spreading contagious diseases and infections.

Tuberculosis is quite prevalent in China. Epidemic diseases are common also, such as typhoid and paratyphoid fevers, cholera and smallpox. Malaria and the two kinds of dysenteries, amoebic and bacillary also are present. Death at childbirth, both of infants and mothers, is quite high, because of the lack of adequate sanitary precautions during childbirth and the practices of the midwives, who do nothing to prevent infection of both mother and child.

Winfield in his book states that "seventy-five per cent of all deaths in China are due to preventable diseases that are under control in the West; there are about 15 million deaths each year in China, of which 11,750,000 are due to preventable diseases." (China: The Land and the People, p. 111).

D. Medical Personnel

The lack of Western-trained doctors, nurses, pharmacists and dentists in the Northwest is an extremely serious problem. Most people, because of the shortage of medical personnel, still go to the local herb-doctors. (A full description of the traditional Chinese science of medicine is given in the General Handbook). In many less acute cases, people either neglect to do anything or attempt to treat themselves by unscientific methods.

E. Efforts of the Government

The Nationalist Government was aware of the serious shortage of medical personnel and equipment in all of China, including the Northwest. Two national organizations were established in the 1930's to deal with these problems: The Department of Public Health under the Ministry of the Interior, which had a Northwestern Office for the Prevention of Epidemics, and the National Health Department under the National Economic Council, which also had an office in the Northwest.

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Health of the Various Nationalities in the Country," was convened by representatives of the Tibetan, Moslem, Yi, Uighur, Mongol, and Han nationalities, representatives of the health administrative organs of the Central People's Government and the various administrative regions, the representatives of the nationalities affairs, authorities of the various administrative regions, leaders of the medical preventive service corps to the national minority areas, and specially invited delegates of all nationalities.

"The Conference will undertake special studies in the diseases which most seriously endanger the health of the people in the national minority areas, such as venereal diseases, malaria, women's and infants' ailments (colds, measles, smallpox, puerperal fever), and thus to proceed to the decision on a definite policy for the work of promoting the health of the national minorities.

The Conference is expected to reach decisions also on various necessary measures for building up a public health system in the minority areas, such as the organization of health machineries, the fostering of health cadres, and the propaganda on health matters among the population." (NCNA Peking, August 24, 1951).

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The need for professional medical help in the Northwest was one of the most urgent problems facing the Communist Government in the implementation of its health program. Young students from Central China with some medical knowledge were encouraged to go to the aid of the national minorities in the Northwest. "Go West" is the slogan of the day, and is considered to be a true pioneering act.

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The primary attention is given to the workers, particularly those working on big governmental projects. "In the mountainous region of Szechwan, Shensi and Kansu Provinces, workers on reconstruction receive medical care. For each billeting camp of 1,000 of more a clinic staffed with 5 to 8 doctors and nurses is operating. Four regular hospitals have been opened in Chengtu and other cities along the line especially for road workers." (FBIS, No. 61, March 29, 1955).

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In April, 1955, a new medical college was opened in Sinkiang to meet some of the problems of lack of medical personnel. Clinics were opened in various parts of the Sinkiang Autonomous Region to combat the most common diseases in the area. Particular emphasis was placed on curing and preventing venereal diseases.

"From June to October, four health service teams dispatched by the venereal disease prophylactic and therapeutic clinic of Sinkiang Uighur Autonomous Region gave free treatment to some 3,000 peasants and nomads of various nationalities. In addition to the prophylactic and therapeutic stations already established in the various counties, another well-equipped outpatient department has been added in Urumchi. The clinic has enrolled 60

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743 students from the nationalities to learn prophylactic and therapeu-
• 744 tic work." (FBIS, November 30, 1955).
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177 Particular attention has also been paid to the Tibetan region as a whole and to Chinghai Province. About health programs developed in Tibet we have the following information: "Over
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657 5 million yüan have been allocated by the Central People's Gov-
743 ernment to develop health work in the Tibet region during the past
744 four years. During this time hospitals have been built in Lhasa
177 and Chamdo; in addition, clinics and mobile medical teams have
¥668 given service to patients in small towns and remote areas.
177 Incomplete statistics show that free medical treatment and innoculation reached 963,000 people. In the same period, 170 Tibetans have been trained as medical workers. The Central People's Government has sent more than 400 doctors and nurses from other parts of the country to the region.

Plans were drawn up at a regional health conference of leading members of Tibet's health organizations and representatives of the Ministry of Public Health to establish more clinics and mobile medical teams and to train 50 to 80 Tibetan medical workers in the coming two years." (FBIS 181, September 16, 1955).

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744 In Chinghai province itself, the Provincial Health Office ad-
743 ministers the health program. Health clinics have been estab-
¥668 lished in different parts of the province. The work here is more difficult because of the many nomadic tribes in the steppes. The
177 Communists have aimed to train people among the nomads to take the position of medical personnel in their tribe. Progress in this area is slower. Some of the bigger already established clinics have been converted to hospitals.

According to their reports, on the whole, the progress made by the Communist Government in the field of health and sanitation is quite impressive. The first positive steps toward improving the health and sanitation conditions have been taken, but there is still much to be done in the future.